

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO. <u>10644514</u>	FILING DATE				
							APPLICANT(S)					
CLAIMS												
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			IND		DEP		
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	
101							51					
2							52					
3							53					
4							54					
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44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	8						TOTAL IND.					
TOTAL DEP.	101						TOTAL DEP.					
TOTAL CLAIMS	109						TOTAL CLAIMS					

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10 644 514
APPLICANT(S) _____

FILING DATE _____

CLAIMS						
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						